



EXPRESS MAIL NO. EV336592422US

**TRANSMITTAL
FORM**(To be used for all correspondence
after initial filing)

Application Number	09/675,984
Filing Date	September 29, 2000
First Named Inventor	Jae Gon Kim
Art Unit	2611
Examiner Name	Kieu Oanh T. Bui
Attorney Docket No.	300055.468

RECEIVED

NOV 12 2004

Technology Center 2600

ENCLOSURES (check all that apply)

- | | | |
|---|---|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form
<input checked="" type="checkbox"/> Fee Attached
<input checked="" type="checkbox"/> Amendment/Response
<input type="checkbox"/> After Final
<input type="checkbox"/> Affidavits/declaration(s)
<input checked="" type="checkbox"/> Extension of Time Request
<input type="checkbox"/> Express Abandonment Request
<input type="checkbox"/> Information Disclosure Statement; Form PTO-1449
<input type="checkbox"/> Cited References
<input type="checkbox"/> Certified Copy of Priority Document(s)
<input type="checkbox"/> Response to Missing Parts under 37 C.F.R. 1.52 or 1.53
<input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input type="checkbox"/> Drawing(s)
<input type="checkbox"/> Request for Corrected Filing Receipt
<input type="checkbox"/> Licensing-related Papers
<input type="checkbox"/> Petition
<input type="checkbox"/> Petition to Convert to a Provisional Application
<input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address
<input type="checkbox"/> Declaration
<input type="checkbox"/> Statement under 37 CFR 3.73(b)
<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> Request for Refund | <input type="checkbox"/> CD(s), Number of CD(s) _____
<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Appeal Communication to TC (<i>Appeal Notice, Brief, Reply Brief</i>)
<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Status Letter
<input checked="" type="checkbox"/> Return Receipt Postcard
<input checked="" type="checkbox"/> Additional Enclosure(s) (<i>please identify below</i>):
<u>Substitute Specification:</u> _____
<u>Redlined Substitute Specification</u> _____ |
|---|---|--|

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Individual Name	E. Russell Tarleton	Customer Number 00500
Signature		
Date	November 8, 2004	

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name ***SENT VIA EXPRESS MAIL***

Signature

Date:

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL **for FY 2005**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$) **624**

Complete if Known	
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METHOD OF PAYMENT	
<input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other	
<input type="checkbox"/> Deposit Account: Deposit Account Number: 19-1090 Deposit Account Name: Seed Intellectual Property Law Group PLLC	
The Director is authorized to (check all that apply) <input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments <input type="checkbox"/> Charge any additional fee(s) during the pendency of this application <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any deficiencies to the above-identified deposit account.	

FEE CALCULATION					
1. BASIC FILING FEE					
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
1001	790	2001	395	Utility filing fee	
1002	350	2002	175	Design filing fee	
1003	550	2003	275	Plant filing fee	
1004	790	2004	395	Reissue filing fee	
1005	160	2005	80	Provisional filing fee	
SUBTOTAL (1)					(\$) 0

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE																																									
Total Claims	42	-32** =	10	Extra Claims	Fee from below																																				
Independent Claims	8	-7** =	1																																						
Multiple Dependent																																									
<table border="1"> <thead> <tr> <th>Large Entity Fee Code</th> <th>Large Entity Fee (\$)</th> <th>Small Entity Fee Code</th> <th>Small Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>1202</td> <td>18</td> <td>2202</td> <td>9</td> <td>Claims in excess of 20</td> <td></td> </tr> <tr> <td>1201</td> <td>88</td> <td>2201</td> <td>44</td> <td>Independent claims in excess of 3</td> <td></td> </tr> <tr> <td>1203</td> <td>300</td> <td>2203</td> <td>150</td> <td>Multiple dependent claim, if not paid</td> <td></td> </tr> <tr> <td>1204</td> <td>88</td> <td>2204</td> <td>44</td> <td>** Reissue independent claims over original patent</td> <td></td> </tr> <tr> <td>1205</td> <td>18</td> <td>2205</td> <td>9</td> <td>** Reissue claims in excess of 20 and over original patent</td> <td></td> </tr> </tbody> </table>						Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	1202	18	2202	9	Claims in excess of 20		1201	88	2201	44	Independent claims in excess of 3		1203	300	2203	150	Multiple dependent claim, if not paid		1204	88	2204	44	** Reissue independent claims over original patent		1205	18	2205	9	** Reissue claims in excess of 20 and over original patent	
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid																																				
1202	18	2202	9	Claims in excess of 20																																					
1201	88	2201	44	Independent claims in excess of 3																																					
1203	300	2203	150	Multiple dependent claim, if not paid																																					
1204	88	2204	44	** Reissue independent claims over original patent																																					
1205	18	2205	9	** Reissue claims in excess of 20 and over original patent																																					
SUBTOTAL (2)					(\$) 134																																				

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)						
3. ADDITIONAL FEES						
Large Entity Fee Code	Large Entity Fee (\$)	Small Entity Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid	
1051	130	2051	65	Surcharge - late filing fee or oath		
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet		
1053	130	1053	130	Non-English specification		
1812	2520	1812	2520	For filing a request for <i>ex parte</i> reexamination		
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action		
1805	1840*	1805	1840*	Requesting publication of SIR after Examiner action		
1251	110	2251	55	Extension for reply within first month		
1252	430	2252	215	Extension for reply within second month		
1253	980	2253	490	Extension for reply within third month	490	
1254	1530	2254	765	Extension for reply within fourth month		
1255	2080	2255	1040	Extension for reply within fifth month		
1401	300	2401	150	Notice of Appeal		
1402	300	2402	150	Filing a brief in support of an appeal		
1403	300	2403	150	Request for oral hearing		
1451	1510	1451	1510	Petition to institute a public use proceeding		
1452	110	2452	55	Petition to revive - unavoidable		
1453	1370	2453	685	Petition to revive - unintentional		
1501	1370	2501	685	Utility issue fee (or reissue)		
1502	490	2502	245	Design issue fee		
1503	660	2503	330	Plant issue fee		
1460	130	1460	130	Petitions to the Commissioner		
1807	50	1807	50	Processing fee under 37 CFR 1.17(q)		
1806	180	1806	180	Submission of Information Disclosure Stmt		
8021	40	8021	40	Recording each patent assignment per property (times number of properties)		
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))		
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))		
1801	790	2801	395	Request for Continued Examination (RCE)		
1802	900	1802	900	Request for expedited examination of a design application		
Other fee (specify) _____						
*Reduced by Basic Filing Fee Paid					SUBTOTAL (3) (\$) 490	

SUBMITTED BY				Customer Number	
Name (Print/Type)	E. Russell Tarleton		Registration No. Attorney/Agent	31,800	
Signature	<i>E. Russell Tarleton</i>		Date	November 8, 2004	
				00500	

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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